



Iowa Department of Human Services

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Director

INFORMATIONAL LETTER NO.1735-MC-FFS

DATE: November 1, 2016

TO: Iowa Medicaid Hospice Agencies

APPLIES TO: Managed Care, Fee-for-Service,

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Hospice Provided in an Intermediate Care Facility for the Intellectually Disabled (ICF/ID)

EFFECTIVE: Immediately

Hospice provided in an ICF/ID no longer requires an exception to policy (ETP). This letter is to provide clarification regarding the policy for hospice in an ICF/ID and reimbursement of ICF/ID room and board, also referred to as pass-through.

Please note the following for hospice members who are living in an ICF/ID facility. Communication with an ICF/ID may be required for information that is needed to complete the forms:

- Any required forms must be submitted to the DHS Centralized Facility Eligibility Unit (CFEU) within two working days after the form was completed.
- Hospice provider reimbursement is directly related to the timely and accurate completion and submission to the CFEU of all hospice forms. This includes the hospice provider reimbursement (Revenue Code 651) as well as pass through ICF/ID reimbursement that the hospice provider will forward to the ICF/ID.
- A [Case Activity Request \(CAR\)](#)¹ must be submitted with either the [Election of Medicaid Hospice Benefit](#)² form or the [Revocation of Medicaid Hospice Benefit](#)³ form at the time of CFEU submission.
- If Medicare is the funding source for the member when hospice services begin, and if the member becomes Medicaid-eligible at a later date, the hospice provider must submit the Election of Medicare Hospice Benefit and the Election of Medicaid Hospice Benefit to the CFEU along with the CAR form.
- If a Medicaid member revokes or is discharged from the hospice benefit, any other Medicaid benefits for which the member is eligible will be initiated. The hospice provider must insure that notification to the CFEU is made for these changes.

If you have any questions please contact the IME Provider Services Unit at 1-800-338-7909, or email at IMEproviderservices@dhs.state.ia.us.

¹ <http://dhs.iowa.gov/sites/default/files/Case%20Activity%20Report.pdf>

² <http://dhs.iowa.gov/sites/default/files/470-2618.DOC>

³ <http://dhs.iowa.gov/sites/default/files/470-2619.DOC>